This is a digital copy of a book that was preserved for generations on library shelves before it was carefully scanned by Google as part of a project to make the world's books discoverable online.

It has survived long enough for the copyright to expire and the book to enter the public domain. A public domain book is one that was never subject to copyright or whose legal copyright term has expired. Whether a book is in the public domain may vary country to country. Public domain books are our gateways to the past, representing a wealth of history, culture and knowledge that's often difficult to discover.

Marks, notations and other marginalia present in the original volume will appear in this file - a reminder of this book's long journey from the publisher to a library and finally to you.

Usage guidelines

Google is proud to partner with libraries to digitize public domain materials and make them widely accessible. Public domain books belong to the public and we are merely their custodians. Nevertheless, this work is expensive, so in order to keep providing this resource, we have taken steps to prevent abuse by commercial parties, including placing technical restrictions on automated querying.

We also ask that you:

+ *Make non-commercial use of the files* We designed Google Book Search for use by individuals, and we request that you use these files for personal, non-commercial purposes.

+ *Refrain from automated querying* Do not send automated queries of any sort to Google's system: If you are conducting research on machine translation, optical character recognition or other areas where access to a large amount of text is helpful, please contact us. We encourage the use of public domain materials for these purposes and may be able to help.

+ *Maintain attribution* The Google "watermark" you see on each file is essential for informing people about this project and helping them find additional materials through Google Book Search. Please do not remove it.

+ *Keep it legal* Whatever your use, remember that you are responsible for ensuring that what you are doing is legal. Do not assume that just because we believe a book is in the public domain for users in the United States, that the work is also in the public domain for users in other countries. Whether a book is still in copyright varies from country to country, and we can't offer guidance on whether any specific use of any specific book is allowed. Please do not assume that a book's appearance in Google Book Search means it can be used in any manner anywhere in the world. Copyright infringement liability can be quite severe.

About Google Book Search

Google's mission is to organize the world's information and to make it universally accessible and useful. Google Book Search helps readers discover the world's books while helping authors and publishers reach new audiences. You can search through the full text of this book on the web at `http://books.google.com/`

Hodge. The Vaccination Superstition.
Med
1859
02

Med 1859.02

HARVARD COLLEGE
LIBRARY

THE GIFT OF

WILLIS ARNOLD BOUGHTON

CLASS OF 1907

The Vaccination Superstition

A BREEDER OF DISEASE

DOES IT PRODUCE SYPHILIS?

TEN CENTS

THE VACCINATION SUPERSTITION

Prophylaxis to be Realized Through the Attainment of Health, not by the Propagation of Disease

Can Vaccination Produce Syphilis?

By J. W. HODGE, M.D.
OF NIAGARA FALLS, N. Y.

(Read before the Western New York Homœopathic Medical Society in Buffalo April 11, 1902)

Med 1859.02

HARVARD COLLEGE
Mar 14.1933
LIBRARY

Willis A. Boughton

CONTENTS

PAGE

Introduction - - - - - - 3
By Bernarr Macfadden.

A City Freed from Smallpox - - 7
By Dr. Friedrich.

The Vaccination Superstition - - 11
By J. W. Hodge, M.D.

Comparison Between Smallpox, Cowpox and Syphilis - - - - 50
By Dr. M. R. Leverson.

Dr. Rodermund's Experiment - - 56

INTRODUCTION

Throughout the civilized world at the present time the vaccination delusion is almost everywhere in full sway.

The Health Boards of the various cities demand it, and usually do everything that they can to enforce it. Rarely are they able to give even an ordinarily reasonable excuse for vaccination. They do not know why they vaccinate, further than their belief that vaccination will prevent smallpox. This belief is not based on any particular theories of their own that they may have deduced from personal experience, but has been secured from their medical colleges, or the physicians who preceded them in authority on the Health Board. It has always

been supposed that vaccination would prevent smallpox, and why should it be questioned? is their argument.

This condition of affairs has induced me to publish in full, with some additions, the address given by Dr. J. W. Hodge, at Buffalo, April 11, 1902.

The facts herein presented can be vouched for in every instance. They are not a mere accumulation of wild theories, and anyone with reasoning powers who will carefully consider them without prejudice, can hardly fail to condemn the vaccination delusion in most emphatic terms.

There is no need of mentioning the baneful, and often hideous results, from this superstition. Lockjaw, blood poisoning and bodily distortions, are only a few of its frightful results.

Vaccination means the poisoning of the blood. It is the introduction into the circulation of the dried pus—poison that exudes from a running sore. Those

vitally strong are able to resist its influence, and, apparently recover, without noticeable harm, but many suffer severely, and pneumonia, diphtheria and scarlet fever are only a few of the diseases that are often produced as an after result of the lessened vital strength and polluted blood that vaccination frequently causes.

Though vaccination may, while the inflammation of the sore remains, tend to lessen the danger of smallpox, it certainly does lessen the general functional vigor, and every disease accompanied by inflammation, especially of the throat and lungs, is extremely liable to result.

Smallpox is only possible to those who clothe heavily, bathe infrequently, eat very heartily and exercise rarely. It is the accumulation of impurities in the blood, and the inability of the inactive pores of the skin to assist in their elimination that gives this disease its victims.

THE VACCINATION SUPERSTITION

We are a virulent enemy of vaccination:

(1) Because it does not prevent smallpox;

(2) Because it lessens one's vital strength and power to resist internal inflammatory diseases;

(3) Because smallpox itself, when treated properly, is easily and quickly curable.

That those who are interested in crushing this superstition may have an opportunity to distribute books of value along this line, in addition to this pamphlet we have published a ten-cent edition of Dr. Felix Oswald's book, entitled "Vaccination a Crime;" former price of this book was $1.00.

Bernarr Macfadden

A CITY FREED FROM SMALLPOX

To Dr. Friedrich, in charge of the Health Board of Cleveland, Ohio, is due the credit of furnishing the civilized world with an example of a large city being absolutely free from smallpox, and it would be well to note that one of the first means that he adopted in producing this result was to abolish vaccination absolutely.

The methods adopted by Dr. Friedrich in accomplishing these results are of such vast importance that I herewith give to my readers in full his recent report giving in detail the methods adopted by him in abolishing this disease.

"It affords me great pleasure to state that the house-to-house disinfection *freed Cleveland from smallpox.* Since August 23,

1901, to this very hour of writing, about April 1, 1902, not a single case has originated in this city, but seven cases were imported. The disease raged here uninterruptedly since 1898. We relied upon vaccination and quarantine as the most effective weapons to combat it, but in spite of all our efforts it doubled itself every year and was in a fair way of repeating the record of last year, as in 1900 we had 993 cases, and from January 1st to July 21,1901, the number amounted to 1,223 On this date I was called to take charge of the health office with seventeen cases on hand. I had been in the city's employ ever since 1899 and it had fallen to my lot to investigate and diagnose most of the cases of smallpox that occurred in Cleveland. During that time I observed that, after disinfection with formaldehyde of a house in which we had found smallpox, never another case could be traced to this house. *On the other hand, vaccination had given us*

many untoward symptoms. Frequently it did not 'take' at all. *One-fourth of all cases developed sepsis instead of vaccini.* SOME ARMS SWELLED CLEAR DOWN TO THE WRIST JOINT, WITH PIECES OF FLESH AS BIG AS A SILVER DOLLAR AND TWICE AS THICK DROPPING RIGHT OUT, LEAVING AN UGLY, SUPPURATING WOUND, WHICH TO HEAL TOOK IN MANY CASES OVER THREE MONTHS. *Finally, four cases of tetanus developed after vaccination, so that the people became alarmed, and rightly so.*

"I laid these facts before Mayor Johnson and proposed to stop vaccination entirely, and instead of it disinfect thoroughly with formaldehyde every section of the city where smallpox had made its appearance; also to give the city a general cleaning up. The Mayor not only consented to my plan, but also gave me all aid needed. I formed two squads of disinfectors, preferring medical students

for the work. Each squad consisted of twenty men, with a regular sanitary patrolman at their head, and each man was provided with a formaldehyde generator. Thus equipped they started out to disinfect every section of the city where the disease had shown its head, and every house in this section, no matter if smallpox had been within or not, and every room, nook and corner of the house, special attention being paid to winter clothes that had been stored away, presumably laden with germs. It took over three months to do the work, but the result was most gratifying. After July 23d seven more cases developed, the last one August 23d.

As a result of it, Cleveland is now free from smallpox, and from the worst infected city it has now become the cleanest.

THE VACCINATION SUPERSTITION

FREEDOM FROM SMALLPOX TO BE REALIZED THROUGH THE ATTAINMENT OF HEALTH, NOT THE PROPAGATION OF DISEASE.

In view of the fact that a bold attempt has recently been made by a representative of the self-styled "regular" profession to place upon our statute books a compulsory vaccination measure, the provisions of which mark a height of brazen effrontery which medical despotism has never before reached in the Empire State; and, inasmuch as the public mind is largely occupied with the questions of smallpox and vaccination at the present, the discussion of some phases of these subjects seems timely and appropriate.

I desire to treat this important topic, not in a spirit of contentiousness, but with a sincere desire to get at the truth even though in so doing some unwelcome facts are disclosed and some cher-

ished ideals are dispelled. My aim is to consider facts as I find them and not as I wish they were.

The advocates of vaccination unhesitatingly assert that the vaccine disease protects its subjects from smallpox, but the facts, so far as we know them, do not warrant this assertion. Indeed, the theory which assumes to conserve health by propagating disease has always had a formidable array of facts to oppose it.

From the days of Jenner to the present time, cases of smallpox have appeared among those who were supposed to be protected by vaccination, and these in no small numbers. When Jenner began the practice of vaccination in 1798, he rashly assumed that one "successful" vaccination was a preventive of smallpox for an entire lifetime. This, it is readily seen, was a mere hypothesis on his part, because in the very nature of the case it was not pos-

sible to determine at that time that the artificial production of one disease would surely prevent, forever afterward, in that subject, the occurrence of another disease (smallpox).

Assumption is not law, and Jenner lived to witness the folly of his error.

I here present a few examples, out of many thousands which are at hand, to warrant the affirmation that vaccination does *not* protect its subjects from smallpox.

The London *Morning Advertiser* of Nov. 24, 1870, reports:

"Smallpox is making still greater havoc in the ranks of the Prussian army, which is said to have thirty thousand smallpox patients in its hospitals." These were all vaccinated and re-vaccinated.

Dr. G. F. Kolb, of the Royal Statistical Commission of Bavaria, officially states: "In the Kingdom of Bavaria, where no one for many years, except

the newly born, escaped vaccination, there were in the epidemic of 1871 no less than 30,742 cases of smallpox, of whom 29,429 had been vaccinated, as is shown by the documents of the State Department."

The *Lancet* (London) of July 15, 1871, editorially states:

"The deaths from smallpox have assumed the proportions of a plague. Over 10,000 lives have been sacrificed during the past year in England and Wales. In London, 5,641 deaths have occurred since Christmas. Of 9,392 patients in the London smallpox hospitals, no less than 6,854 had been vaccinated, i. e., nearly 73 per cent. Taking the mortality at 17½ per cent. of those attacked, and the deaths this year in the whole country at 10,000, it will follow that more than 122,000 vaccinated persons have suffered from smallpox. This is an alarming state of things. Can we greatly wonder that the opponents of

vaccination should point to such statistics as an evidence of the failure of the system? It is necessary to speak plainly on this important matter."

Statistics of similar import might be quoted by the page, chapter and volume, but time and space forbid. One such fact is as good as a thousand, because it effectually destroys the foundation of the theory of preventive vaccination.

In the annual report of the Health Department of the City of New York, 1870-71, it is stated:

"This extraordinary prevalence of smallpox over various parts of the globe, especially in countries where vaccination has long been efficiently practiced; its occurrence in its most fatal form in persons who gave evidence of having been well vaccinated, and the remarkable susceptibility of people of all ages to revaccination, are new facts in the history of this pestilence, which must lead to reinvestigation of the whole subject of

vaccination and of its claim as a protecting agent."

A. M. Ross, M. D., A. M., an eminent old school physician of Toronto, in writing about the Montreal smallpox epidemic of 1885, said:

"Whoever closely watched the course of the epidemic in Montreal must conclude that vaccination is utterly useless as a protection from smallpox. Much of what transpired in our smallpox hospitals was suppressed, especially whatever was likely to operate against the progress of vaccination, which proves a golden harvest to the vaccinators. But notwithstanding the conspiracy of silence, a few official reports came out, pregnant with proof against vaccination, and demonstrating beyond question that a large proportion of the patients admitted to our smallpox hospitals had been vaccinated, and that many of them died, some with two and others with three vaccine marks upon their bodies."

THE VACCINATION SUPERSTITION

The *New York Medical Journal*, edited by Frank P. Foster, M. D., in its issue of July 22, 1899, contains an article, entitled "Vaccination in Italy," written by Charles Ruata, M. D., Professor of Hygiene and of Materia Medica in the University of Perugia, Italy, in which he demonstrates by the presentation of the most trustworthy official statistics, that preventive vaccination in that country has been a complete and certain failure.

Prof. Ruata prefaces his article with the following affirmation:

"Italy is one of the best vaccinated countries in the world, if not the best of all, and we can prove that mathematically." He says: "Our young men, with few exceptions, at the age of twenty years must enter the army, where a regulation prescribes compulsory vaccination." After having quoted the official statistics of the Italian Government as proof of his assertion, he says: "For twenty years before 1885, our na-

tion was vaccinated in the proportion of 98.5 per cent. Notwithstanding, the epidemics of smallpox that we have had have been something so frightful that nothing before the invention of vaccination could equal them."

In Italy, having a population of 30,000,000, 98.5 per cent. of whom were officially declared vaccinated, Dr. Ruata goes onto say:

"During the year 1887, we had 16,249 deaths from smallpox; in 1888, 18,110, and in 1889, 13,413." In referring to the Italian army, in which "vaccination had been performed twice a year in the most satisfactory manner for many years past," Dr. Ruata says: "Now we see that soldiers not protected because vaccinations did not 'take' were less attacked by smallpox than those 'duly protected' by the good results of their re-vaccination; and that the death-rate in those vaccinated with good results was greater than among those in whom vaccination did not take."

In regard to the vaccine material used, Dr. Ruata says:

"I have limited my analysis to the last six years, during which time the only lymph used in all our army has been animal lymph, exclusively, furnished by the Government Institute for the production of animal lymph." After having cited the government statistics, which sustain his conclusion, Prof. Ruata remarks: "The 'duly protected' soldiers were attacked by smallpox in a proportion double that among the 'unprotected' soldiers.

"As you see, these are official statements, extremely trustworthy because they were made in a country where and at a time when, no one thought that it was possible to raise a doubt against the dogma of vaccination. In our country," he continues, "we have no league against vaccination, and every father thinks that vaccination is one of his first duties. For these reasons no

bias could exist against vaccination in making these statistics."

The figures of these statistical records presented in the *New York Medical Journal*, from the pen of an eminent professor in an Italian University, stand as unimpeachable witnesses to the fact that preventive vaccination has been a complete failure in Italy, which we are assured is one of the most thoroughly vaccinated countries on the globe.

I now call another witness, Prof. Alfred Russel Wallace, LL.D., F.R.S., the co-discoverer with Darwin of the theory of evolution, an expert statistician and one of the ablest scientific men of England. In his latest great scientific work, entitled "The Wonderful Century," Professor Wallace has devoted a chapter to the consideration of the most trustworthy statistics, on a large scale, as relating to smallpox and vaccination. He tells us that in April, of the year 1889, Queen Victoria appointed a commission

of eight of the most distinguished medical men of England and quite a number of eminent men in other professions, to investigate the question of the effect of vaccination. This commission, we are told, spent more than seven years in its investigation, held 136 meetings, examined about 200 witnesses, and investigated six epidemics which had occurred in recent years at Gloucester, Sheffield, Warrington, Dewsbury, Leicester and London.

It is upon the evidence presented in the majority report of this commission that Prof. Wallace bases his statements and conclusions, some of which I herewith present. He has critically examined the early tests employed by the advocates of vaccination to prove the alleged protective influence of the practice, and has pointed out the fallacy and complete inefficiency of these tests. He has brought together an array of remarkable test cases which illustrate

the utter worthlessness of vaccination. Of these crucial tests I shall be able to present but a few:

"The first is that of Leicester, which for the past twenty years has rejected vaccination till it has now almost vanished, and smallpox is almost unknown. The second is that of the army and navy in which, for a quarter of a century, every recruit had been re-vaccinated, unless he had been recently vaccinated or had smallpox. In the first we have an almost unvaccinated population of nearly 200,000, which, on the theory of the vaccinators, should have suffered exceptionally from smallpox; in the other we have a picked body of nearly 220,000 men who, on the evidence of the medical authorities, are as well protected as they know how to make them, and among whom, therefore, smallpox should be almost or quite absent, and smallpox deaths quite unknown. Let us see, then, what has

happened in these two cases. In both it has been clearly proven that small-pox increased with the increase of vaccination, and decreased under sanitation, cleanliness and hygienic living."

After having set forth page upon page of these test cases, Prof. Wallace observes:

"It is thus completely demonstrated that all the statements by which the public has been gulled for so many years, as to the almost complete immunity of the re-vaccinated Army and Navy, are absolutely false. It is all what Americans call 'bluff.' There is *no immunity.* They have no *protection.* When exposed to infection they *do* suffer just as much as other populations, or even more. In the whole of the nineteen years, 1878–96, inclusive, unvaccinated Leicester had so few small-pox deaths that the Registrar-General represented the average by the decimal 0.01 per thousand population, equal to ten per million, while for the twelve

years 1878–89 there was less than one death per annum. Here we have *real immunity, real protection;* and it is obtained by attending to sanitation and isolation, coupled with the almost total neglect of vaccination. Neither army nor navy can show any such results as this."

"Now," says Prof. Wallace, "if there exists such a thing as a crucial test, this of the army and navy as compared with Leicester, affords such a test. The populations concerned are hundreds of thousands; the time extends over a generation; the statistical facts are clear and indisputable; while the case of the army and navy has been falsely alleged again and again to afford indisputable proof of the value of vaccination when performed on adults."

Prof. Wallace produces official statistics which verify his affirmation that, 'The town of Leicester is, and has been for the past twenty years, the least vaccinated town in the kingdom.

Its average population from 1873 to 1894 was about two-thirds of that of the army during the same period. Yet smallpox deaths in the army and navy were thirty-seven per million, those of Leicester under fifteen per million."

Prof. Wallace justly declares: "It is not possible to have a more complete and crucial test than this is, and it absolutely demonstrates the utter uselessness, or worse than uselessness, of re-vaccination."

"Before leaving Leicester," says Prof. Wallace, "it will be instructive to compare it with some other towns of which statistics are available. And first, as to the great epidemic of 1871-72 in Leicester and in Birmingham. Both towns were then well vaccinated, and both suffered severely by the epidemic. Thus:

Per 10,000 population	Leicester	Birmingham
Smallpox cases	327	213
Smallpox deaths	35	35

"But since then Leicester has rejected vaccination to such an extent that in 1894 it had only seven vaccinations to 10,000 population, while Birmingham had 240, or more than thirty times as many, and the proportion of its inhabitants who have been vaccinated is probably less than one-half of that of Birmingham. The Commissioners themselves state that the disease (smallpox) was brought into the town of Leicester on twelve separate occasions during the recent epidemic, yet the following is the result:

1891–94.

Per 10,000 population	Leicester	Birmingham
Smallpox cases.....	19	63
Smallpox deaths.....	1 1-10	5

"Here we see that Leicester had less than *one-third* the cases of smallpox and less than one-fourth the deaths in proportion to population than well vaccinated Birmingham; so that both the alleged *protection* from attacks of the

disease and *mitigation* of its severity, when it does attack, are shown not only to be absolutely untrue, but to apply, in this case, to the absence of vaccination."

The last quotation from "The Wonderful Century" which I shall here present is the following:

"But we have yet another example of an extremely well-vaccinated town in this epidemic—Warrington, an official report on which has been issued. It is stated that 99.2 per cent. of the population had been vaccinated, yet comparison with unvaccinated Leicester stands as follows:

Epidemic of 1892–93.

Per 10,000 population	Leicester	Warrington
Smallpox cases.....	19.3	123.3
Smallpox deaths.....	1.4	11.4

"Here, then, we see that in the thoroughly vaccinated town the cases are more than six times, and the deaths more than eight times, that of the

almost unvaccinated town, again proving that the most efficient vaccination does not *diminish* the number of attacks, and does not *mitigate* the severity of the disease, but that both these results follow from sanitation and isolation."

The history of smallpox in Leicester, England, has, as pointed out by Prof. Wallace, furnished conclusive testimony to the world that smallpox can be confined within very narrow limits without any assistance (?) from the vaccine operation.

In 1872, when Leicester was a well-vaccinated city, it was visited by a smallpox epidemic and suffered a heavy mortality. The doctors had so overdone the business of coercive vaccination, and public prosecution, that the people arose *en masse* in open revolt against the propagation of the vaccinator's poison. This emphatic protest had the effect of checking vaccination and of diminishing the percentage of vaccinations to the number

of births. From page 209 of "The Wonderful Century" I quote the following:

"But immediately after the great Leicester epidemic of 1872, which was worse than in London, the people began to reject vaccination, at first slowly, then more rapidly, till for the last eight years (1890–98) less than five per cent. of the births have been vaccinated. During the whole of the last twenty-four years smallpox deaths have been very few, and during twelve consecutive years, 1878–89, there was a total ot only eleven smallpox deaths in this populous town."

Thus, we see the history of Leicester presents one of the best object lessons of the past thirty years; for since its smallpox epidemic of 1872 its citizens not only arose in open revolt and rid themselves of the incubus of vaccination, but also instituted as thorough a system of sanitation as their crowded population of nearly 200,000 would admit of. Leicester, therefore, under the guidance of

a creed, the main articles of which are founded on the teachings of sanitary science and obedience to the laws of hygiene, stands out clear and distinct above all other cities in England, both as a rebuke to the vaccine practice, and as a testimony that salvation from the contagion of smallpox lies in the direction of sanitary regulations and hygienic habits of life. In defence of the Leicester system, which is simply a system of thorough sanitation, the report of its medical officer for 1893 tells a story which should be emphatically and repeatedly impressed upon the mind of every health-board official throughout the civilized world.

Addressing his townsmen, the Leicester health officer said: "You are entitled to great credit, more especially in the case of smallpox, which, by the methods you have adopted, has been prevented from running riot throughout the town, thereby upsetting all the

prophecies which have again and again been made. I need only mention such towns as Birmingham, Warrington, Bradford, Walsall, Oldham, and the way they have suffered during the past year from the ravages of smallpox, to give you an idea of the results you in Leicester have achieved—results of which I, as your medical officer of health, am justly, I think, proud."

The foregoing are a few of the hundreds of demonstrations that can be cited of the utter worthlessness of vaccination as a preventive of smallpox. If protection is good for anything, it should be effective during the prevalence of an epidemic; but, as we have seen, that is just where the unvaccinated enjoy the greater immunity from the variolous infection. Can any one explain why it is, that the vaccine practice continues to be perpetuated, and the contagion of the cowpox disorder to be propagated by the medical profession in the face of such evidence as this?

The statement of such demonstrations as these puts the advocates of vaccination in a very awkward predicament, to say the least. A knowledge of such clean-cut facts should be sufficient to destroy in unprejudiced minds all belief in the efficacy of so-called preventive vaccination.

The ancient theory which ignores the laws of hygiene and sanitation by teaching the absurd doctrine that the propagation of the contagion of disease by ingrafting it into the bodies of healthy people can be advantageous to the well-being of a community, should find no favor with the sanitary rationalist of the twentieth century and, in my humble opinion, deserves the open condemnation of every scientific physician.

Belief in this curious dogma has tended to foster a disregard for cleanliness. By leading people to overlook the real cause and to neglect the true preventive of smallpox, it has done much

to obstruct the progress of truth and to retard the evolution of hygiene and sanitary science.

Instead of having been instructed by their family physician to observe the laws of health and to avoid the causes of disease, people have on the contrary been taught, for a century, to rely upon a fetich for immunity from a filth-disease.

The only measure which has been found competent to cope with smallpox and other zymotic diseases is cleanliness. As people learn to keep their dwelling apartments clean and well ventilated, their streets and alleys free from the accumulation of filth, their water supply pure, their food free from injurious adulteration, their bodies free from the accumulation of effete tissue, by taking plenty of exercise in the open air, they rise superior to the thraldom of zymotic disorders.

There is no exception to this rule.

Whom do these diseases attack? The untidy and unclean. What neighborhoods do they visit? The filthiest. What cities do they select? Those in which sanitary conditions are most neglected. Note the smallpox epidemic of Montreal of 1885, in which 3,400 people died of the disease. Who were the victims? The very lowest class of society, children who were filthy, neglected and ill-fed, who were living in houses that were overcrowded, destitute of proper ventilation, and in courts and alleys reeking with filth and where sanitation is a term unknown.

So-called "successful" vaccination is nothing less than the implanting into the healthy organism the virulent products of diseased animal tissue, with the effect of inducing actual disease. The performance of such an operation, in the very nature of the case, violates every principle of modern aseptic surgery, the legitimate aim of which is to

remove from the organism the products of disease and never to *introduce* them. The chief aim of the modern surgeon is to make and treat wounds aseptically. The careful operator employs every means at his command to clear the field of operation of all bacteria, and he uses every available resource of the marvelously minute and intricate technique of asepsis to prevent the entrance, through wounded tissue, into the organism of any germ or morbific agent before, during, and after an operation. He fears sepsis as he fears death; and yet, under the blighting and blinding influence of an ancient and venerated superstition, he will intentionally inoculate into the circulation of a healthy human being the virulent animal poison, vaccine virus, the infective products of diseased animal tissues, under strictly aseptic conditions.

Think of the unparalleled absurdity of deliberately infecting the organism

of a healthy child, in this era of sanitary science and aseptic surgery, with the poisonous matter obtained from a sore on a diseased calf, under the pretense of protecting the victim of the ingrafted disease against the contagion of another disease! Can inconsistency go farther than this? Inoculating an indeterminate lot of microbes into a healthy organism under aseptic precautions! Ladies and gentlemen of this society, just think of it!

In considering the subject of preventive vaccination the question arises: What is vaccinia? And what is it that the vaccinator implants into the healthy human organism? Into this part of the subject time forbids me to enter, except to point out a few brief quotations from high authorities on this subject.

From the American Text Book of Diseases of Children, article Vaccination, by T. S. Westcott, M. D., (p. 192) I quote the following: "The exact nature

of vaccinal disease is a question which has been the subject of repeated theorizing and experimentation since the time of Jenner, and even at the present day no concensus of opinion has been reached." Many pro-vaccinal authorities aver the belief that vaccinia is smallpox modified or attenuated by passing through the system of a cow. This theory, however, rests on very inconclusive evidence and must soon be relinquished.

Dr. Chauven, in his notable address before the French Academy of Medicine, October, 1891, after detailing his elaborate experiments, which had continued for years, concludes:

(1) "Vaccine virus never gives smallpox to man;

(2) "Variolic virus never gives vaccinia to the cow;

(3) "Vaccinia is not even attenuated smallpox."

Vaccinia is, in all probability, a

the theory of the great antiquity of man on the earth), which table formed the basis of his thesis read before the American Association of Physicians and Surgeons at Indianapolis, in January, 1896, and which has been now for more than six years unquestioned by the profession. This table, a copy of which I now present you, is a condensed statement in parallel columns of the primary and secondary symptoms of smallpox, cowpox and syphilis, from the separate descriptions of the most renowned authorities upon these several diseases. It shows an almost complete likeness between the two latter and a total unlikeness of each to smallpox. Thus we come face to face with the gravest and, at the same time, the most disgusting aspect of the whole vaccination problem. Here we have some of the highest authorities who have produced the clearest evidence showing that vaccinia is modified syphilis. The chronic and pro-

tean manifestations which at times follow vaccination must have impressed us all with their close analogy to syphilitic lesions.

Prof. Alfred Russell Wallace has proven by the testimony submitted in the Majority Report of the Royal Commission of Inquiry on Vaccination, that the cowpox practice instead of protecting its subjects from the contagion of smallpox, actually rendered them more susceptible to it. This conclusion, based upon facts, is in harmony with the physician's daily observations and experiences. Health is the ideal state to be sought for and attained, not disease. Disease should always be avoided. Every pathogenic disturbance in the infected organism wastes and lowers the vital powers, and thus diminishes its natural resisting capacity.

This fact is so well known and so universally conceded that it seems superfluous to cite authorities. Neverthe-

less, at the risk of being considered redundant, I shall mention a couple. The American Text Book of Surgery, one of the latest standard works (p.59,) says:

"The healthy body is intolerant of bacteria and will resist the invasion of a mass of organism which an inflamed or diseased part may be unable to withstand."

Another of the latest works, The International Text Book of Surgery (Vol. 1. p. 263), is authority for the following statement:

"Persons weakened by disease or worn out by excessive labor yield more readily to infection than healthy individuals."

If this is true, it explains why, in variolous epidemics, smallpox always attacks the vaccinated first, and why this disease continues to infest the civilized world while its allied "filth-diseases" have disappeared before the

advance of civilization, through the good offices of sanitation, hygiene and isolation of the sick.

In conclusion, I venture to think that I am warranted in maintaining that an impartial and comprehensive study of vital statistics, gleaned from every reliable source, proves that the extension of the practice of vaccination cannot be shown to have any logical relation to the diminution of cases of smallpox.

After a careful consideration of the history of vaccination and smallpox, and after an experience derived from having vaccinated more than 3,000 subjects, I am firmly convinced that Edward Jenner saddled a legacy of disease and death upon the human race, and incidentally made $150,000 by the transaction;

That the practice of vaccination has been the means of disseminating some of the most fatal and loathsome dis-

eases, such as leprosy, cancer, syphilis, tetanus and tuberculosis;

That vaccination is not only useless, but positively injurious;

That instead of protecting its subjects from the contagion of smallpox, it actually renders them more susceptible to it by depressing the vital power and diminishing natural resistance;

That vaccination was introduced at a time when smallpox was a diminishing factor, and, by checking smallpox inoculation, withdrew a fertile source of variolous propagation;

That the discontinuance of variolous inoculation, therefore, rather than the practice of vaccination, accounted for the diminished prevalence of smallpox during the first three decades of the last century;

That previous to the introduction of vaccination, variolous inoculation was unanimously believed in and generally practiced by the doctors of the self-

styled "regular" profession in multiplying smallpox cases by spreading the contagion;

That there is no evidence worthy of the name on record to prove that vaccination either prevents or mitigates smallpox;

That many thousands of healthy children have died from the effects of vaccination;

That millions of vaccinated people have died of confluent smallpox while having the plainest vaccine scars on their bodies;

That smallpox epidemics invariably attack the vaccinated first;

That smallpox is a filth-disease which ever follows closely upon flagrant violations of the laws of hygiene and sanitation;

That the occurrences of all the great epidemics of smallpox have coincided with periods of sanitary neglect;

That cowpox and venereal pox have much in common;

That the analogy between the manifestations of vaccine and those of syphilis is so close that several of the most eminent pathologists of the world regard cowpox as a modified form of syphilis;

That the condition set up by vaccinia is often chronic and as protean in its manifestations as is syphilis;

That the identity of cowpox and syphilis was first clearly pointed out by Dr. Hubert Boens-Boissan in 1882;

That so-called "spontaneous cowpox" is a myth;

That cowpox is a disorder not natural to the cow; that it never occurs in bulls or steers, nor in young heifers that have never been milked; that it is a disease of milch cows which has been communicated to them from sores on hands of milkers who were suffering from the "bad disease;"

That when these facts are fully realized by the medical profession and

the public it will not take long to put an end to the crime of compulsory vaccination;

That the community that has sanitary surroundings, a pure water supply, wholesome food, good health and freedom from the blood-poisoning incident to vaccination, need have no more fear of smallpox than of measles;

That Leicester stands out clear and distinct above all the other cities in England, both as a rebuke to the vaccine practice, and as a testimony that salvation from the infection of zymotic diseases lies in the direction of sanitary regulations and hygienic habits of life;

That the legitimate function of the true physician is not to *propagate disease*, but to *restore health* and *prevent* disease;

That the attainment of health is the great desideratum;

That a state of health is the ideal state to be sought after and attained;

That no man can be truly said to be susceptible to the contagion of smallpox or to that of any other disease so long as he is in a state of perfect health;

That such a state resists and repels the assaults of all morbific influences and is therefore the best protective against disease;

That it is never necessary to actually set up one disease in a healthy organism to protect against another; that such a procedure is an appalling violation of the basic principles of hygiene and sanitary science;

That immunity from the contagion of all diseases is to be realized through the attainment of health, not by the propagation of disease;

That the performance of the vaccine operation, in the very nature of the case, violates the cardinal precepts of modern aseptic surgery, the aim of which is to *exclude from* the economy

pathogenic bacteria and to remove the products of disease from the organism, and never to *introduce* them;

That vaccination has utterly failed to fulfill the flattering promises made for it by Jenner and his followers;

That a portly volume could be filled with the records of these failures;

That compulsory vaccination has been abolished in Switzerland and England, while laws sanctioning this crime still disgrace the statute books of "free" America;

That compulsory vaccination ranks with human slavery and religious persecution as one of the most flagrant outrages upon the rights of the human race;

That the vaccine operation, which consists in abrading the epidermis and implanting an indeterminate lot of microbes into the organism of a healthy person, is opposed to the laws of hygiene and to all the teachings of modern surgical practice;

That immunity from the contagion of smallpox is to be realized through the *attainment* of health, not by the *propagation* of *disease;*

That attention to hygiene and sanitation, supplemented by segregation of the sick, have robbed smallpox of all its terrors;

That enlightenment on these subjects is sure to bring the conviction that the *propagation of disease* under the pretext of *preventing disease* has been a *malefaction,* instead of a *benefaction* to the human race.

COMPARISON BETWEEN SMALLPOX, COWPOX AND SYPHILIS.

For a continuation of the comparison of cowpox and syphilis see page 55.

SMALLPOX.

1. Eruption general, superficial.

2. Constitutional or general symptoms precede the eruption and are relieved on its appearance.

3. Eruption first felt as a No. 8 bird shot beneath the skin, it then appears as a papule; then a vesicle, becoming pustular about the 5th or 6th day, is from one to three lines in length; but the pustules are of various kinds, irregular, elevated, generally perforated by a hair, induration, if any, very slight, no tendency to a gnawing ulceration of the skin.

4. The fluid is contained in two chambers—a superficial and a deep, which communicate around the edges of the separating membrane. The infective material (if any) is carried in the air.

5. The smallpox pustules *leave no scar* if properly treated.

6. The smallpox eruption does not affect the lymphatic system.

7. Infectious.

8. Inoculable.

9. The smallpox is epidemic taking its rise in filthy localities.

(VACCINATION) COWPOX.

PRIMARY LESION.

1. Eruption local, deep, in the corium of skin or subcutaneous tissue, or in the mucous membrane.

2. Constitutional symptoms do not precede but follow the eruption in all cases.

3. Pustule* always the same, first a papule, then a vesicle, becoming pustular about the 8th day, 7 to 10 lines in diameter, round, centrally depressed, margin indurated and not perforated by a hair, has a cellular membrane at floor, tendency to a gnawing ulceration.

4. The fluid is contained in a single chamber, reticulated, is non-volatile, and the infection is communicated only by immediate contact with an abraded surface.

5. The cowpox leaves a foveated scar.

6. The cowpox poison permeates the lymphatic channels and ganglia, causing inflammation, buboes, and abscesses.

7. Not infectious.

8. Inoculable.

9. Cowpox is independent of time and place; communicated only by direct inoculation.

GREATPOX OR SYPHILIS.

1. Eruption local, deep, in the corium of skin or subcutaneous tissue, or in the mucous membrane.

2. Constitutional symptoms do not precede but follow the eruption in all cases.

3. Pustule* always the same, first a papule rapidly becoming pustular without perceptibly passing through a vesicular stage, 7 to 10 lines in diameter, scooped out, deep funnel-shaped with sloping edges often elevated, not perforated by a hair, has a fungoid membrane at floor, tendency to a gnawing ulceration.

---

* *i. e.*, The Chancre
Smallpox cured—no further symptoms manifested.

4. Absolutely the same as the cowpox.

5. Similar to the scar of cowpox, but varies in character.

6. Absolutely the same as the cowpox.

7. Not infectious.

8. Inoculable.

9. Absolutely the same as cowpox.

The smallpox patient, upon recovery, is free from the disease even if he is marked by scars. Smallpox will not beget either cowpox or syphilis. On the contrary, there are various subsequent manifestations in vaccination, or cowpox, which are remarkably like those that appear in what are known as secondary and tertiary periods of syphilis. We have tabulated in parallel columns some of the many manifestations that appear in both these diseases, and a glance will reveal their striking similarity.

COWPOX.	SYPHILIS
Phagedenic sores.	Phagedenic sores.
Nodes in the head.	Nodes in the head.
Ophthalmia.	Ophthalmia.
Dentition delayed in children, with production of the so-called syphilitic teeth.	Dentition delayed in children, with production of the so-called syphilitic teeth.
Eczema of all kinds.	Eczema.
Herpes.	Herpes.
Ready fracture and difficult healing of bone, also probably caries in some cases.	Caries of bone.
Insanity, probably.	Insanity.
Scrofula.	Scrofula.
Mucous patches on tonsils, tongue and lips tending to ulceration.	Mucous patches on tonsils, tongue and lip tending to ulceration.
Bronchitis.	Bronchitis.
Tuberculosis, probably.	Tuberculosis.
Arrest of development.	Arrest of development.

DR. RODERMUND'S EXPERIMENT

On Monday, Jan. 21, 1901, about 11.30 A. M., I entered the residence of Mr.——, where Miss Stark was confined with the smallpox.

As I entered the house Mr.—— jumped from his chair and said: "We are not allowed to let anyone enter this house."

"Never mind," I said, "I am not anybody, so perhaps you have made no mistake."

I then stated that I came to see the smallpox patient.

"There she is," he said, pointing towards a young woman, in a far corner of the room. Mrs.—— sat by the window sewing, while a child about two years old ran about the room.

"Are you not afraid of taking smallpox from the girl?" I asked.

"No," replied the mother, "we are not afraid."

"But the doctors say this disease is very contagious; are they not very careless and negligent in not keeping this patient away from the rest of the family? This is a genuine case of smallpox, just see the large pustules full of pus. Of course I know you can't take the disease from another."

Then to show them that this was true, I broke open several of the large pustules on her face and arms and took the pus out of them and smeared it all over my face, hands, beard and clothes, and at the same time remarked that I would now go home to dinner.

I mentioned nothing of the affair to my family during the meal and went directly to my office without telling anyone. The first person who came in the office was an old friend, Rev. T., who

has a parish at North Milwaukee. We shook hands heartily; in fact, I had entirely forgotten that I was covered with smallpox poison. I presented him with one of my books and, according to our scientific and wilful deceivers of the public, I must have covered the book and gentleman with smallpox germs, and he in return must have exposed many people in Appleton, those he met on the train, and finally his whole congregation. The germs on the book, I suppose, are still enjoying themselves in the spiritual home of the reverend gentleman.

During the same afternoon I touched the faces of several persons in my office while treating their eyes and fitting glasses. From 4 to 6 and from 8 to 10 o'clock the same afternoon I was at the Business Men's Club, where I mingled and played cards with the members.

In the evening the conversation drifted to the smallpox case I had visited in the morning. After discussing the

subject for a while, one of them asked me if I would visit a smallpox patient and then go home to my family. I quietly remarked that I would just as soon do it as visit a patient with a common cold.

Finally, Mr. Dickinson, cashier in one of our banks, remarked rather sarcastically: "Now, doctor, what's the use of talking such nonsense, you would no more think of visiting a smallpox patient and then go home and sleep with your family than you would go home and shoot one of your children. You are too sensible for that."

The reader can imagine the state of my mind at that time, as none of them had an inkling that I was at that very time covered with smallpox pus, and that the cards we were playing with were being loaded with this poison. Still, I never once mentioned my visit to them. Further, I would never have gone to the club-rooms if I had had the least idea

that my actions would ever be known, as I knew the sentiment of these gentlemen and I also had too much respect for them and myself, to impose upon their feelings, even if I did know that their belief was a foolish superstition. I have done similar acts dozens of times during the past fifteen years and have in each instance watched the results and not the slightest harm has ever been done to anyone.

To return to our subject, after leaving the club-rooms that evening I went home, slept with my family, and the next morning took the train to Green Bay, without washing my hands or face, and wearing the same clothes. I took breakfast at Green Bay and then went to the store of Mr. M——, who had engaged me to fit glasses for his customers on that day. I handled the faces of twenty-seven persons during the day, besides those I exposed on the streets and in the train when on my way home.

The next morning (Wednesday) I washed my hands and face, the first time since they had been smeared with pus 46½ hours before. When I arrived at my office I found several reporters waiting to ascertain if the report were true that I had visited the smallpox patient and had smeared myself with pus. In the beginning I neither affirmed nor denied the accusation, because I did not want it known, but upon inquiry I learned that one of the neighbors had seen me come out of the house and asked the health officer if the family had changed doctors, as she had seen Dr. Rodermund come out of the house on Monday.

Consequently there was nothing for me to do save tell the exact truth, which I did. The newspapers, however, mixed untruth with the truth in such a way as to mislead the public. Among other things they stated that I had personally bragged of what I had done,

when they knew that I never intended it to become known to the world until the people were ready to consider such revolutionary truths for their own benefit.

I was allowed my freedom about the city all day Wednesday, but on Thursday, the fourth day, I was quarantined and a guard of policemen stationed around the house. The people had been so aroused by the health officer, doctors, city officials, and the newspapers, that one of the policemen told me that it was a good thing I was protected by a strong guard, otherwise my life was in danger.

Saturday I broke quarantine in spite of five policemen, drove forty miles to Waupaca, took the train for Chicago, from there went to Terre Haute, Ind., and on my way back home was arrested in Milwaukee and held for four days in the pest house. This is a brief outline of the whole episode which created such a sensation.

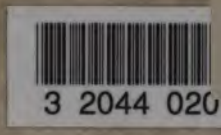
The sanctimonious frauds and deceivers of the public (doctors) tried in every way, shape and manner, to trace a case of smallpox to my actions, but with no avail. Even after I had exposed 50,000 people, and rubbed my pus-covered hands over thirty-seven faces, they could find nothing against me. In the near future I will publish a few similar incidents which have happened to me the past years, and which are far more interesting than this one.

Why is not one out of the thousands of these medical scoundrels, murderers, and deceivers, ever turned up to win the prize which reads as follows: One thousand dollars will be given to anyone who can prove that disease is contagious; also ten dollars for each day it takes him to prove it.

The doctors know that by superstition the people can best be held. Then, I want to ask you, are not the people more to blame than the doctors?

More than half the public do not believe in contagion, but they lack the courage to say so. Discussion and argument will never change the present conditions. They never settle a question where a powerful body of men have law and money on their side. A powerful public sentiment, combined with true knowledge, is the only remedy. As long as you drowse in your old superstitions, these murderers will continue to ruin your constitutions for the money there is in it.

Does any sane man believe that God created such laws which, if disobeyed at any time by one person, would spread a loathsome disease over a whole nation? This superstition is a blasphemy upon Almighty justice.—*Dr. Rodermund in The Searchlight.*



The borrower must return this item on or
the last date stamped below. If another u
places a recall for this item, the borrower will
be notified of the need for an earlier return.

Non-receipt of overdue notices does ***not*** *exempt the borrower from overdue fines.*

Harvard College Widener Library
Cambridge, MA 02138 617-495-2413

Please handle with care.
Thank you for helping to preserve
library collections at Harvard.